

## General Assembly

Substitute Bill No. 368

February Session, 2022



## AN ACT CONCERNING SUICIDE PREVENTION.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

- Section 1. Section 17a-52 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2022*):
- 3 (a) There is established a [Youth] Connecticut Suicide Advisory 4 Board, within the Department of Children and Families, which shall be 5 a coordinating source for suicide prevention across a person's lifespan, 6 including, but not limited to, youth suicide prevention. The board [shall 7 consist of twenty members, which shall include may include (1) 8 representatives from suicide prevention foundations, youth-serving 9 organizations, law enforcement agencies, religious or fraternal 10 organizations, civic or volunteer groups, state and local government 11 agencies, tribal governments or organizations, health care providers or 12 local organizations with expertise in the mental health of children or 13 adults or mental health issues with a focus on suicide prevention, (2) 14 one psychiatrist licensed to practice medicine in this state, (3) one 15 psychologist licensed in this state, (4) one representative of a local or 16 regional board of education, (5) one high school teacher, (6) one high 17 school student, (7) one college or university faculty member, (8) one 18 college or university student, [and] (9) one parent, and (10) a person 19 who has experienced suicide ideation or loss, all appointed by the

20 Commissioner of Children and Families. [,] The board shall include one 21 representative of the Department of Public Health appointed by the 22 Commissioner of Public Health, one representative of the state 23 Department of Education appointed by the Commissioner of Education 24 and one representative of the Board of Regents for Higher Education 25 appointed by the president of the Connecticut State Colleges and 26 Universities. [The balance of the board shall be comprised of persons 27 with expertise in the mental health of children or mental health issues 28 with a focus on suicide prevention and shall be appointed by the 29 Commissioner of Children and Families. Members of the board shall 30 serve for two-year terms, without compensation. Any member who fails 31 to attend three consecutive meetings or fifty per cent of all meetings held 32 during any calendar year shall be deemed to have resigned from the 33 board. The Commissioner The Commissioners of Children and 34 Families and Mental Health and Addiction Services, or the 35 commissioners' designees, shall [be a nonvoting, ex-officio member of 36 the board. The board shall elect a chairman, and a vice-chairman to act 37 in the chairman's absence serve as cochairpersons of the board and may 38 appoint a representative of a local organization with expertise in mental 39 health or a suicide prevention foundation to serve as a third 40 cochairperson of the board. The board may adopt bylaws to govern it 41 and its meetings.

(b) The board shall: (1) Increase public awareness of the existence of [youth] suicide and means of suicide prevention across a person's lifespan; (2) make recommendations to the [commissioner] Commissioners of Children and Families and Mental Health and Addiction Services for the development of state-wide training in the prevention of [youth] suicide; (3) develop a <u>state-wide</u> strategic [youth] suicide prevention plan; (4) recommend interagency policies and procedures for the coordination of services [for youths and families] in the area of suicide prevention, intervention and response; (5) make recommendations for the establishment and implementation of suicide prevention, intervention and response procedures in schools and communities; (6) establish a coordinated system for the utilization of

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data for the prevention of [youth] suicide; (7) make recommendations 54 55 concerning the integration of suicide prevention and intervention strategies into [other] youth-focused prevention and intervention 56 programs; and (8) periodically offer, within available appropriations, 57 58 [youth] suicide prevention training and education for health care and 59 behavioral health care providers, school employees, faculty members of 60 <u>institutions of higher education</u> and other persons who provide services 61 to children, [young] adults and families.

- Sec. 2. Subsection (b) of section 20-10b of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1*, 2022):
- (b) Except as otherwise provided in subsections (d), (e) and (f) of this section, a licensee applying for license renewal shall earn a minimum of fifty contact hours of continuing medical education within the preceding twenty-four-month period. Such continuing medical education shall (1) be in an area of the physician's practice; (2) reflect the professional needs of the licensee in order to meet the health care needs of the public; and (3) during the first renewal period in which continuing medical education is required and not less than once every six years thereafter, include at least one contact hour of training or education in each of the following topics: (A) Infectious diseases, including, but not limited to, acquired immune deficiency syndrome and human immunodeficiency virus, (B) risk management, including, but not limited to, prescribing controlled substances and pain management, and, for registration periods beginning on or after October 1, 2019, such risk management continuing medical education may also include screening for inflammatory breast cancer and gastrointestinal cancers, including colon, gastric, pancreatic and neuroendocrine cancers and other rare gastrointestinal tumors, (C) sexual assault, (D) domestic violence, (E) cultural competency, and (F) behavioral health, provided further that on and after January 1, 2016, such behavioral health continuing medical education may include, but not be limited to, at least two contact hours of training or education during the first renewal

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87 period in which continuing education is required and not less than once 88 every six years thereafter, on (i) suicide prevention, or (ii) diagnosing 89 and treating [(i)] (I) cognitive conditions, including, but not limited to, Alzheimer's disease, dementia, delirium, related cognitive impairments 90 91 and geriatric depression, or [(ii)] (II) mental health conditions, 92 including, but not limited to, mental health conditions common to 93 veterans and family members of veterans. Training for mental health 94 conditions common to veterans and family members of veterans shall 95 include best practices for [(I)] determining whether a patient is a veteran 96 or family member of a veteran, [(II)] screening for conditions such as 97 post-traumatic stress disorder, risk of suicide, depression and grief, and 98 [(III)] suicide prevention training. For purposes of this section, 99 qualifying continuing medical education activities include, but are not 100 limited to, courses offered or approved by the American Medical 101 Association, American Osteopathic Association, Connecticut Hospital 102 Association, Connecticut State Medical Society, Connecticut 103 Osteopathic Medical Society, county medical societies or equivalent 104 organizations in another jurisdiction, educational offerings sponsored 105 by a hospital or other health care institution or courses offered by a 106 regionally accredited academic institution or a state or local health 107 department. The commissioner, or the commissioner's designee, may 108 grant a waiver for not more than ten contact hours of continuing medical 109 education for a physician who [: (I) Engages] engages in activities 110 related to the physician's service as a member of the Connecticut 111 Medical Examining Board, established pursuant to section 20-8a, [; (II)] 112 engages in activities related to the physician's service as a member of a 113 medical hearing panel, pursuant to section 20-8a, [; or (III)] or assists the 114 department with its duties to boards and commissions as described in 115 section 19a-14.

- Sec. 3. Subdivision (6) of subsection (b) of section 10-222q of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2022*):
  - (6) Three appointed by the minority leader of the Senate, one of

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- whom is a representative of the Connecticut Education Association; one
- of whom is a representative of the National Alliance on Mental Illness,
- 122 Connecticut; and one of whom is a representative of the [Youth]
- 123 <u>Connecticut</u> Suicide Advisory Board established pursuant to section
- 124 17a-52, as amended by this act;

This act shall take effect as follows and shall amend the following sections:		
Section 1	July 1, 2022	17a-52
Sec. 2	July 1, 2022	20-10b(b)
Sec. 3	July 1, 2022	10-222q(b)(6)

**PH** Joint Favorable Subst.